

## WAGE QUERY FORM

ASSIGNMENT DETAILS	
Employee Name	
Job Role	
Client/Supervisors Name	
Client Company Name	
Client Site	
Date Of Enquiry	

QUERY DETAILS	
Date(s) of missing hours?	
Hours missing?	

Please ensure that the correct dates/Shift/hours are provided, without this information there may be a delay in your query being resolved.

Signature of Agency Worker	
Date of Signature	

Client Use Only	
Comments:	
Print Name: _____	Position: _____
Signature: _____	Date: _____
Office Use Only	
Date Enquiry Received:	Date Enquiry Resolved:
Print Name: _____	
Signature: _____	Date: _____